

MANAGEMENT INFORMATION SYSTEM

1. MIS Capability

- A. Contractor's MIS shall have the capability to capture, edit, and utilize various data elements for both internal management use as well as to meet the data quality and timeliness requirements of DHS's encounter data submission. Contractor shall have and maintain a MIS that provides, at a minimum:
 - 1. All Medi-Cal eligibility data,
 - 2. Information of Members enrolled in Contractor's plan,
 - 3. Provider claims status and payment data,
 - 4. Health care services delivery encounter data,
 - 5. Provider network information, and
 - 6. Financial information as specified in Exhibit A, Attachment 1, regarding Administrative Duties/Responsibilities.
- B. Contractor's MIS shall have processes that support the interactions between Financial, Member/Eligibility; Provider; Encounter Claims; Quality Management/Quality Improvement/Utilization; and Report Generation subsystems. The interactions of the subsystems must be compatible, efficient and successful.

2. Encounter Data Submittal

Contractor shall implement policies and procedures for ensuring the complete, accurate, and timely submission of encounter data for all services for which Contractor has incurred any financial liability, whether directly or through subcontracts or other arrangements. Encounter data shall include data elements specified in DHS' most recent Managed Care Data Element Dictionary and all existing Policy Letters related to encounter data reporting.

Contractor shall require subcontractors and non-contracting providers to provide service level data to Contractor, which allows the Contractor to meet their administrative functions and the requirements set forth in this section. Contractor shall have in place mechanisms, including edits and reporting systems sufficient to assure service level data is complete and accurate prior to submission to DHS.

Contractor shall submit encounter data to DHS on a monthly basis in the form and manner specified in DHS' most recent Managed Care Data Element Dictionary and all existing Policy Letters related to encounter data reporting.

Upon written notice by DHS that the encounter data is insufficient or inaccurate, Contractor shall ensure that corrected data is resubmitted within fifteen (15) days of receipt of DHS' notice. Upon Contractor's written request, DHS may provide a written extension for submission of corrected encounter data.

3. MIS/Data Correspondence

Upon receipt of written notice by DHS of any problems related to the submittal of data to DHS, or any changes or clarifications related to Contractor's MIS system, Contractor shall submit to DHS a Corrective Action Plan with measurable benchmarks within thirty (30) calendar days from the date of the postmark of DHS' written notice to Contractor. Within thirty (30) days of DHS' receipt of Contractor's Corrective Action Plan, DHS shall approve the Corrective Action Plan or request revisions. Within fifteen (15) days after receipt of a request for revisions to the Corrective Action Plan, Contractor shall submit a revised Corrective Action Plan for DHS approval.

4. Health Insurance Portability and Accountability Act of 1996 (HIPAA) Readiness

Contractor shall comply with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Readiness requirements and all Federal and State regulations promulgated from this Act, as they become effective.